FILING DATE SERIAL NO. **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER AFTER 1st AMENDMENT AS FILED 2nd AMENDMENT DEP. IND. DEP. IND. DEP. IND. DEP. DEP. IND. IND. IND. उ 3 . . 1. TOTAL IND. O_D **₽** TOTAL IND. Î TOTAL DEP. YOYAL CLAIMS

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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TOTAL DEP.

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